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TO: U.S. Patent and Trademark Office

TELEFAX #: (571) 273-8300

ATTENTION:

DATE: November 7, 2005

TIME: 3:25 p.m.

NUMBER OF PAGES: 12 total page(s) (including this cover)

FROM: Rochelle Lieberman, Esq.

RE: Application Serial No.: 10/649,269
 Attorney Docket No.: BEA9-2003-0002-US1

DESCRIPTION: Preliminary Amendment

COMMENT:

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Voice Confirmation Required:	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
Original to Follow by Mail/Courier:	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No

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PATENT

Atty. Docket No.: BEA9-2003-0002-US1

CERTIFICATION OF TRANSMISSION	
I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office, Fax No. (571) 273-8300 on November 7, 2005.	
<i>11/7/2005</i> Date of Deposit	<i>Rochelle Lieberman</i>

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:	Rao et al.
SERIAL NO.:	10/649,269
FILING DATE:	August 27, 2003
FOR:	Reliable Fault Resolution In A Cluster

Group Art Unit: 2184

Examiner:

AMENDMENT TRANSMITTAL LETTER

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Enclosed is a preliminary amendment in the above-identified patent application.

[x] An additional fee is required, and is calculated as shown below:

FEE CALCULATION TABLE					
	NO. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	ADDT'L FEE
Total Claims	31	MINUS 20 =	11	x \$50 =	\$550
Independent Claims	5	MINUS 3 =	2	x \$200 =	\$400
If Amendment adds multiple dependent claims, add \$360.00					

Total Amendment Fee	\$950
If small entity status is claimed, subtract 50% of Total Amendment Fee	
TOTAL ADDITIONAL FEE DUE FOR THIS AMENDMENT	\$950

Payment Authorization:

A credit card payment form in the amount of \$950.00 made payable to "Commissioner of Patents and Trademarks" to cover the filing fee is also enclosed. Please stamp the postcards indicating the serial number assigned to this patent application.

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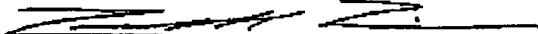
Please charge Deposit Account No. 501336 in the amount of \$0.00. A duplicate copy of this sheet is enclosed.

The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 501336. A duplicate copy of this sheet is enclosed.

Any additional filing fees required under 37 C.F.R. §1.16.

Any patent application processing fees under 37 C.F.R. §1.17.

Respectfully submitted,

By: 

Rochelle Lieberman
Registration No. 39,276
Attorney for Applicant

Lieberman & Brandsdorfer, LLC
802 Still Creek Lane
Gaithersburg, MD 20878
Phone: (301) 948-7775
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email: rocky@legalplanner.com

Date: November 7, 2005

Total Amendment Fee	\$950
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Deposit Account Authorization:

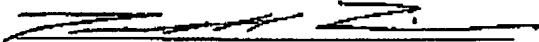
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Any patent application processing fees under 37 C.F.R. §1.17.

Respectfully submitted,

By: 

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Registration No. 39,276
Attorney for Applicant

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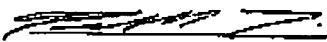
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FILING DATE: August 27, 2003

Examiner:

FOR: Reliable Fault Resolution In A Cluster

PRELIMINARY AMENDMENT

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Prior to examination please amend the above-identified patent application and give consideration to the following remarks with respect to the above-identified patent application as follows:

11/08/2005 TL0111 00000022 10649269

01 FC:1201
02 FC:1202400.00 OP
550.00 OP